

State of New Hampshire Bureau of Developmental Services

**Draft Acquired Brain Disorder Waiver
Renewal – Public Comment Sessions
June 2021**



New Hampshire's Acquired Brain Disorder Public Comment Process

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- The public comment period is 6/01/21 through noon on 6/30/21.
- The Bureau of Developmental Services (BDS) relies on stakeholders to provide recommendations on what the delivery system should include so that all waiver recipients can receive the services they need.
- BDS appreciates your feedback on the Acquired Brain Disorder Waiver (ABD) draft by participating in the public comment sessions.
- Your comments will be included in the submission to the Centers for Medicare and Medicaid Services (CMS).



New Hampshire's Acquired Brain Disorder Public Comment Process

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- Please note that this presentation is not all-inclusive of changes in the draft Waiver and is only a high level review. You are encouraged to review the Waiver in its entirety at the following link:
<https://www.dhhs.nh.gov/dcbcs/bds/dd-waiver-renewal.htm>
- The final draft of the Waiver is to be submitted to CMS by 7/30/21.
- The new Waiver will be effective by 11/1/21, with approval from CMS.



Changes to Existing Service Definitions

- All references to Recreation or Therapeutic Recreation have been eliminated as required by the Technical Guide for 1915(c) waivers.
- Participant Directed and Managed Services (PDMS) has been removed as a service, however services outlined in Appendix C are available via PDMS as outlined in Appendix E.
- "Residential Habilitation" has replaced "Residential Habilitation/Personal Care". "Personal Care" has been dropped from the name of the service however the Personal Care services that were included in Residential Habilitation/Personal Care are included in the definition of the Residential Habilitation service definition.



Changes to Existing Service Definitions (continued)

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- Service delivery has been modified to allow for remote service provision.
- Temporary provision of services in acute settings (such as hospital settings), based on an individual's needs as identified in Appendix C.



Newly Covered Services

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Personal Emergency Response Services

Individual Goods and Services

Non-Medical Transportation

Community Integration Services



Newly Covered Service:

Personal Emergency Response Services (pg. 95)

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- Smart technology that may include various types of devices such as electronic devices that enable participants at risk of institutionalization to summon help in an emergency.
- Covered devices may include wearable or portable devices that allow for safe mobility, response systems that are connected to the participant's telephone and programmed to signal a response center when activated, staffed and monitored response systems that operate 24 hours/day, seven days/week and any device that informs of elopement such as wandering awareness alerts.
- Other covered items may include seatbelt release covers, ID bracelets, GPS devices, monthly expenses that are affiliated with maintenance contracts and/or agreements to maintain the operations of the device/item.
- Various devices can be an option to consider as a part of a multifaceted safety plan, specific to a participant's unique needs.



Personal Emergency Response Systems - Limits

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- There is an annual \$2,000 service limit.
- An individual may exceed this service limit cap with prior authorization approval from BDS. A prior authorization for the amount requested beyond the service limit cap must include supporting documentation, identify need and correlate to the person centered plan.
- Any device that might be considered restrictive will be part of a modification plan (behavior plan) and will be approved by the individual, guardian and the local Human Rights Committee.



Newly Covered Service:

Individual Goods and Services (pg. 88)

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- Services, equipment, or supplies not otherwise provided through this waiver or through the Medicaid State Plan that address an identified need in the individual service agreement (ISA) (including improving and maintaining the participant's opportunities for full membership in the community) and meet the following requirements:
- The item or service must:
 - Decrease the need for other Medicaid services; and/or
 - Promote inclusion in the community; and/or
 - Increase the participant's safety in the home environment; and
 - The participant and their family does not have the funds to purchase the item or service is not available through other sources.
 - Must not be an otherwise covered state plan service.



Individual Goods and Services (continued)

- Purchased based on needs identified in the individual service agreement.
- Experimental or prohibited treatments are excluded.
- Individual Goods and Services must be documented in the ISA.
- The coverage of these services permits a state to authorize the purchase of goods and services that are not otherwise offered in the waiver or the state plan. The goods and services purchased under this coverage may not circumvent other restrictions on the claiming for the costs of room and board.
- This service may be provided remotely through telehealth as determined necessary by the state to ensure services are delivered while considering individual choice, cost effectiveness and compliance with CMS requirements and identified in the individual's person-centered plan.



Individual Goods and Services – (continued)

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- This service may be provided in an acute setting under the following conditions:
 - Identified in an individual's person-centered service plan;
 - Provided to meet needs of the individual that are not met through the provision of hospital services;
 - Not a substitute for services that the hospital is obligated to provide through its conditions of participation or under Federal or State law, or under another applicable requirement; and
 - Designed to ensure smooth transitions between acute care settings and home and community-based settings, and to preserve the individual's functional abilities.
- The item or service must be identified as necessary in the individual service agreement. A goal related to the use of the item or service should be available in the individual service agreement, amendments to the service agreement should indicate this item if it wasn't in the original service agreement.



Individual Goods and Services - Limits

- Documentation related to the use of the item should be available for review in monthly notes. This item should have an anticipated shelf life. The frequency of purchase would be contingent upon the continued need of the item and the item's ability to continue to meet that need.
- Service Limit: \$1,500
 - An individual may exceed this service limit cap with prior authorization approval from BDS.
 - A prior authorization for the amount requested beyond the service limit cap must include supporting documentation, identify need and correlate to the person centered plan.



Newly Covered Service:

Non-Medical Transportation (pg. 91)

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- Designed specifically to improve the individual's and the caregiver's ability to access community activities within their own community in response to needs/choices identified through the individual's service agreement.
- Transportation services can include, but are not limited to:
 1. Transport for safe movement from one place to another;
 2. Travel training such as supporting the individual in learning how to access and use informal and public transport for independence and community integration;
 3. Transportation service provided by different modalities, including; public and community transportation, taxi services, transportation specific to prepaid transportation cards, mileage reimbursement, volunteer transportation, and non-traditional transportation providers, and
 4. Prepaid transportation vouchers and cards
 5. Parking and toll fees



Non-Medical Transportation – (continued)

- When the provider is transporting the individual, the individual is with the caretaker and the only transportation that may be covered is when the transportation that occurs is directly related to the individual's disability or specific to a caretaker providing the transportation to activities determined in the individual service agreement that are not otherwise covered by NH State Plan or other state authorities.
- Caretakers will provide proof of insurance, complete all required registry checks, and have a completed driving record check. Youth under the age of 16 shall not be reimbursed for public transportation expenses.



Non-Medical Transportation - Limits

- Service Limit: \$5,000
 - Up to \$10,000 annual is allowable for individuals that require specialized transportation including wheelchair van/lift and/or a van that allows the individual being transported to “not” be within arm’s reach of the driver for safety reasons.
 - Verification of an individual's need for specialized transportation will be required upon request to the Bureau of Developmental Services.
 - The Bureau of Developmental Services Administrator reserves the right to approve requests that exceed the cap on a case by case basis. Proof of this need to exceed the cap will be required upon request to the Bureau of Developmental Services.
 - Coverage of non-medical transportation may be permitted when non-medical transportation is not otherwise available through a service in the waiver or the state plan.



Newly Covered Service:

Community Integration Services (pg. 77)

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- Utilize activity-based interventions to address the assessed needs of an individual as a means to health and well-being as outlined in the service agreement.
- Designed to support and enhance a person's level of functioning, independence and life activities, to promote health and wellness as well as reduce or eliminate the activity limitations and restrictions to participation in life situations caused by a disability.
- A pass or membership for admission to community-based activities is covered only when needed to address assessed needs. Community based activity passes shall be purchased as day passes or monthly passes, whichever is the most cost effective.
- Community integration services include activities that promote an individual's health and well being.
- Fees for water safety training are allowable.
- Community based camperships are allowable.



Community Integration Services - Limits

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- This service may be provided remotely through telehealth as determined necessary by the State to ensure services are delivered while considering individual choice, cost effectiveness and compliance with CMS requirements and identified in the individual's person-centered plan.
- Service Limit: \$8,000 annually
 - Community integration services inclusive of therapeutic services and camperships will have an \$8,000 cap.
 - Any single community integration service over \$2,000 will require a licensed healthcare practitioner's recommendation.
 - A health care practitioner's note is not needed for campership.



Existing Services

Community Participation Services

Residential Habilitation

Respite

Service Coordination

Supported Employment

Assistive Technology

Community Support Services

Crisis Response Services

Environmental and Vehicle Modifications

Specialty Services

Wellness Coaching



Community Participation Services (pg.53)

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- Day Habilitation/Community Participation Services are provided as part of a comprehensive array of community-based services for persons with acquired brain disorders that:
 - Assist the individual to attain, improve, and maintain a variety of life skills, including vocational skills;
 - Emphasize, maintain and broaden the individual's opportunities for community participation and relationships;
 - Support the individual to achieve and maintain valued social roles, such as of an employee or community volunteer;
 - Promote personal choice and control in all aspects of the individual's life and services, including the involvement of the individual, to the extent he or she is able, in the selection, hiring, training, and ongoing evaluation of his or her primary staff and in determining the quality of services; and
 - Are provided in accordance with the individual's service agreement and goals and desired outcomes.



Community Participation Services (continued)

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- All community participation services shall be designed to:
 - Support the individual's participation in and transportation to a variety of integrated community activities and settings;
 - Assist the individual to be a contributing and valued member of his or her community through vocational and volunteer opportunities;
 - Meet the individual's needs, goals, and desired outcomes, as identified in his or her service agreement, related to community-based opportunities for volunteerism, employment, personal development, socialization, communication, mobility, and personal care;
 - Help the individual to achieve more independence in all aspects of his or her life by learning, improving, or maintaining a variety of life skills, such as:
 - Traveling safely in the community; Managing personal funds; Participating in community activities; and Other life skills identified in the service agreement; Promote the individual's health and safety; Protect the individual's right to freedom from abuse, neglect, and exploitation; and Provide opportunities for the individual to exercise personal choice and independence within the bounds of reasonable risks.



Community Participation Services - Limits

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- Community participation services shall be primarily provided in community settings outside of the home where the individual lives.
- There are no limits identified in this service



Residential Habilitation (pg.57)

- Residential Habilitation includes a range of individually tailored supports to assist with the acquisition, retention, or improvement of community living skills including but not limited to: Assistance with activities of daily living and personal care such as meal preparation, eating, bathing, dressing, personal hygiene, medication management, community inclusion, transportation, social and leisure skills, and adaptive skill development to assist the individual to reside in the setting most appropriate to his/her needs.
- Services and supports may be furnished in the home or outside the home.
- This service may be provided remotely through telehealth as determined necessary by the state to ensure services are delivered while considering individual choice, cost effectiveness and compliance with CMS requirements and identified in the individual's person-centered plan.
- This service may be provided in an acute setting.



Residential Habilitation - Limits

- This waiver service is not available to individuals who are eligible to receive such service through the Medicaid State Plan.
- Payment is not made for the cost of room and board, building maintenance, upkeep, nor improvement.



Respite (pg. 62) / Limits

- Respite Care services consist of the provision of short-term assistance, in or out of an eligible individual's home, for the temporary relief and support of the family that would typically provide the care.
- Respite services can be provided in or out of the participant's home.
- When respite is provided as a service in a Participant Directed and Managed Service (PDMS), the total respite shall not exceed 20% of the overall PDMS budget.
- This service may be provided in an acute setting
- When respite is provided as a service in a Participant Directed and Managed Service (PDMS) program, the total respite shall not exceed 20% of the overall PDMS budget.
 - The BDS Bureau Chief has the ability to determine limits on a case by case basis due to capacity issues.



Service Coordination (pg. 65) / Limits

- Services which will assist eligible individuals in gaining access to needed waiver and or State Plan services, as well as needed medical, social, educational and other services, regardless of the funding source.
- This service may be provided remotely through telehealth as determined necessary by the State to ensure services are delivered while considering individual choice, cost effectiveness and compliance with CMS requirements and identified in the individual's person-centered plan.
- This service may be provided in an acute setting
- There are no limits for this service.



Supported Employment (pg.68)

- Employment services will provide access to community-based employment and make available, based upon individual need and interest: employment supports, transportation to work, training and educational opportunities, the use of co-worker supports and generic resources to the maximum extent possible.
- All employment services shall be designed to:
 - Assist the individual to obtain employment, customized employment or self-employment, including the development of microenterprises that are integrated in the community, that is based on the individual's employment profile and goals in the service agreement;
 - Provide the individual with opportunities to participate in a comprehensive career development process that helps to identify the individual's employment profile;
 - Support the individual to develop appropriate skills for job searching, including: Creating a resume and employment portfolio;



Supported Employment (continued)

- All employment services shall be designed to (cont.):
 - Practicing job interviews; and Learning soft skills that are essential for succeeding in the workplace;
 - Assist the individual to become as independent as possible in his or her employment, internships, and education and training opportunities by:
 - Developing accommodations;
 - Utilizing assistive technology; and
 - Creating and implementing a plan to fade services;



Supported Employment (continued)

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- Help the individual to:
 - Meet his or her goal for the desired number of hours of work as articulated in the service agreement; and
 - Earn wages of at least minimum wage or prevailing wage, unless the individual is pursuing income based on self-employment;
 - Assess, cultivate, and utilize natural supports within the workplace to assist the individual to achieve independence to the greatest extent possible;
 - Help the individual to learn about, and develop appropriate social skills to actively participate in, the culture of his or her workplace;
 - Understand, respect, and address the business needs of the individual's employer, in order to support the individual to meet appropriate workplace standards and goals;



Supported Employment (continued)

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- Help the individual to (cont.):
 - Maintain communication with, and provide consultations to, the employer to:
 - Address employer specific questions or concerns to enable the individual to perform and retain his/her job; and
 - Explore opportunities for further skill development and advancement for the individual;
 - Help the individual to learn, improve, and maintain a variety of life skills related to employment, such as:
 - Traveling safely in the community;
 - Managing personal funds;
 - Utilizing public transportation; and
 - Other life skills identified in the service agreement related to employment;
 - Promote the individual's health and safety;
 - Protect the individual's right to freedom from abuse, neglect, and exploitation; and
 - Provide opportunities for the individual to exercise personal choice and independence within the bounds of reasonable risks.



Supported Employment (continued) / Limits

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- This service may be provided remotely through telehealth as determined necessary by the state to ensure services are delivered while considering individual choice, cost effectiveness and compliance with CMS requirements and identified in the individual's person-centered plan.
- This service may be provided in an acute setting
- There are no limits identified for this service



Assistive Technology (pg.73)

- This service covers assistive technology and any related assistive technology services.
- Assistive technology means an item, piece of equipment, certification and training of a service animal (service animal as defined by the American Disabilities Act (ADA)), or product system, whether acquired commercially, modified or customized, that is used to increase, maintain or improve functional capabilities of participants.
- Assistive technology services means a service that directs/assists a participant in the selection, acquisition or use of an assistive technology device.



Assistive Technology (continued)

- Assistive technology includes:
 - The evaluation of the assistive technology needs of a participant including a functional evaluation of the impact of the provision of appropriate assistive technology and appropriate services to the participant in the customary environment of the participant;
 - Services consisting of purchasing, leasing or otherwise providing for the acquisition of assistive technology/devices for participants.
 - Services consisting of selecting, designing, fitting, customizing, adapting, applying, maintaining, repairing or replacing assistive technology devices such as therapies, interventions, or services associated with other services in the service plan.
 - Coordination and use of necessary therapies, interventions or services associated with other services in the service plan.
 - Training or technical assistance for the participant or where appropriate, the family members, guardians, advocates or authorized representatives of the participant; and
 - Training or technical assistance for professional or other individuals who provides services to, employ or are otherwise substantially involved in the major life functions of participants.



Assistive Technology (continued)

- Devices, controls, or appliances, specified in the individual service agreement that enable the individual to increase their ability to perform activities of daily living, and/or perceive, control, or communicate with the environment in which they live will be covered.
- Adaptive equipment may only include items of durable and non-durable medical equipment necessary to address the individual's functional limitations and specified in the plan of care.
 - Adaptive equipment may be covered so long as the equipment is necessary to address the individual's functional limitations and is not to be used for recreational purposes.
- May include performance of assessments to identify type of equipment needed by the participant.
- This service may be provided remotely through telehealth as determined necessary by the state to ensure services are delivered while considering individual choice, cost effectiveness and compliance with CMS requirements and identified in the individual's person-centered plan.
- This service may be provided in an acute setting



Assistive Technology (continued)

- Assistive technology provided through the waiver is over and above that which is available under the state plan or that is the obligation of the individual's employer.
- Individual service agreement (ISA) will specify the following:
 1. The item;
 2. The name of the healthcare practitioner recommending the item;
 3. An evaluation or assessment regarding the appropriateness of the item;
 4. A goal related to the use of the item;
 5. The anticipated environment that the item will be used;
 6. Current modifications to item/product and anticipated future modifications and anticipated cost.



Assistive Technology - Limits

- Service Limit: \$10,000 over the course of 5 years
- An individual may be able to exceed this cap on a case-by-case basis with the prior approval of BDS. A prior authorization for the amount requested above the service limit cap must include supporting documentation, identify need, and correlate to the person-centered plan.



Community Support Services (pg.79)

- Community Support Services are intended for the individual who has developed, or is trying to develop, skills to live independently within the community.
- Community Support Services consist of assistance provided to an individual to improve or maintain his or her skills in basic daily living, transportation and community integration; to enhance his or her personal development and well being in accordance with goals outlined in the individual's service agreement.
- This service may be provided remotely through telehealth as determined necessary by the State to ensure services are delivered while considering individual choice, cost effectiveness and compliance with CMS requirements and identified in the individual's person-centered plan.
- This service may be provided in an acute setting, only when the parent or guardian is not available.



Community Support Services - Limits

- Community Support Services are capped at 30 hours per week.
- Services may begin and continue for up to 24 consecutive months (two years) while the individual is still residing with his/her family.
- This service does not include costs related to room and board.
- The BDS Administrator reserves the right to exceed the cap and/or time limitations placed on this service on a case by case basis.



Crisis Response Services (pg.82)

- Includes direct consultation, clinical evaluation, staffing supports and transportation to individuals who are experiencing a behavioral, emotional or medical crisis or challenge. These services are intended to address the individual's specific problems, thereby reducing the likelihood of harm to the individual or others, and assisting the individual to return to his/her pre-crisis status.
- This service may be provided remotely through telehealth as determined necessary by the state to ensure services are delivered while considering individual choice, cost effectiveness and compliance with CMS requirements and identified in the individual's person-centered plan.
- This service may be provided in an acute setting



Crisis Response Services - Limits

- This waiver service is not available to individuals who are eligible to receive such service through the Medicaid State Plan.
- Limited to six-month approval.



Environmental and Vehicle Modifications (pg.85)

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- Include those physical adaptations to the private residence of the participant, or vehicle that is the waiver participants primary means of transportation, required by the individual's service plan, that are necessary to ensure the health, welfare and safety of the individual, or which enable the individual to function with greater independence in the home and community, and without which, the individual would require institutionalization.
- Such adaptations may include the installation of ramps and grab-bars, widening of doorways, modification of bathroom facilities, or installation of specialized electric and plumbing systems, which are necessary to accommodate the medical equipment and supplies, which are necessary for the welfare of the individual.



Environmental and Vehicle Modifications

(continued)

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- Excluded are those adaptations or improvements to the home, which are of general utility, and are not of direct medical or remedial benefit to the individual, such as carpeting, roof repair, central air conditioning, etc.
- Adaptations that add to the total square footage of the home are excluded from this benefit except when necessary to complete an adaptation.(e.g., in order to improve entrance/egress to a residence or to configure a bathroom to accommodate a wheelchair).
- All modifications will be provided in accordance with applicable State or local building codes.



Environmental and Vehicle Modifications

(continued)

- Relative to vehicle modification, the following are excluded: Those adaptations or improvements to a vehicle that are of general utility, and are not of direct medical or remedial benefit to the individual; purchase or lease of a vehicle; and regularly scheduled upkeep and maintenance of a vehicle with the exception of upkeep and maintenance of the modifications.
- This service may be provided in an acute setting



Environmental and Vehicle Modifications - Limits

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- For individuals with unsafe wandering and running behaviors, outdoor fencing may be provided under this waiver.
 - Waiver funds allocated toward the cost of such a fence shall not exceed \$2,500 which can provide approximately 3,500 square feet of a safe area.
- Exceptions to this service limitation may be made on a case by case basis.
- Payment may not be made to adapt the vehicles that are owned or leased by paid providers of waiver services.



Specialty Services (pg.98)

- Intended for recipients whose needs in the areas of medical, behavioral, therapeutic, health and personal well-being require services which are specialized pertaining to unique conditions and aspects of acquired brain disorders.
- Specialty Services are utilized to provide assessments and consultations and are used to contribute to the design, development and provision of services, training support staff to provide appropriate supports as well as the evaluation of service outcomes and transportation if applicable.
- This service may be provided remotely through telehealth as determined necessary by the state to ensure services are delivered while considering individual choice, cost effectiveness and compliance with CMS requirements and identified in the individual's person-centered plan.
- This service may be provided in an acute setting.



Specialty Services - Limits

- Any items provided under this category must be based on an assessed need by a qualified provider and cannot be available as a benefit under the NH State Medicaid Plan.



Wellness Coaching (pg.101)

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- Plan, direct, coach and mentor individuals with disabilities in community based, inclusive exercise activities based on a licensed recreational therapist or certified personal trainer's recommendation.
- Develop specific goals for the individual's service agreement, including activities that are carried over into the individual's home and community; demonstrate exercise techniques and form, observe participants, explain to them corrective measures necessary to improve their skills, and transportation if applicable.
- Collaborate with the individual, his or her guardian (if applicable) and other caregivers and with other health and wellness professionals as needed.
- This service may be provided remotely through telehealth as determined necessary by the state to ensure services are delivered while considering individual choice, cost effectiveness and compliance with CMS requirements and identified in the individual's person-centered plan.
- This service may be provided in an acute setting



Wellness Coaching -Limits

- The Services must not otherwise be covered by NH State Plan.
- Wellness coaching services has an annual cap of \$5,000.



General Revisions and Enhancements

- The waiver includes the compliance and implementation of the Center for Medicare and Medicaid Services (CMS) approved NH Corrective Action Plan regarding conflict-of-interest requirements, direct bill, and provider selection requirements.
- The Bureau of Developmental Services (BDS) has coordinated a long term supports and services (LTSS) participant directed and managed services (PDMS) committee with broad stakeholder membership. The committee will develop a PDMS manual which will clearly define the rights and responsibilities of individuals and/or guardians relative to managing Medicaid funds and detail budget authority and employment authority.
- The waiver details compliance with the Home and Community Based Service's (HCBS) Final Rule and Regulations per 42 CFR 441.301(c)(4).



General Revisions and Enhancements (continued)

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- Performance measures have been updated to reflect the changes outlined in the CMS March 2014 Guidance: Modifications to Quality Measures and Reporting in 1915(c) Home and Community-Based Waivers.
- The Supports Intensity Scale (SIS) and Health Risk Screening Tool (HRST) will not require prior authorization to bill.
- The newly created Participant Directed and Managed Services (PDMS) Committee will support the state's efforts to help those families using this service delivery model.



Options for providing feedback

- Public Comment Sessions:
 - Date: Thursday, June 10, 2021 / Time: 2:00 - 4:00 pm
 - Date: Friday, June 11, 2021 / Time: 10:00 - 12:00 pm
 - Date: Thursday, June 17, 2021 / Time: 5:00 - 7:00 pm
 - Date: Tuesday, June 22, 2021 / Time: 10:00 - 12:00 pm
- BDS has a web page on the DHHS website designated for information on the Acquired Brain Disorder Waiver renewal;
<https://www.dhhs.nh.gov/dcbcs/bds/abd-waiver.htm>
- BDS has an email address designated for the HCBS waiver renewals;
DLTSSWaiverRenewal@dhhs.nh.gov
- Public Comment period ends on June 30th, 2021 at noon.



Thank you for your support in helping New Hampshire develop a strong waiver to support individuals who live with an acquired brain disorder.

